agriculture, the farmland protection bill, wetland reserves program, wildlife habitat incentives program, the conservation security program, the environmental quality investment program, these critical programs to protect the environment and American agriculture, we do not have money to fund them adequately, but we are paying out millions to illegal cockfighters. This should not happen, and I want this body to join me for an accounting by the Department of Agriculture of what is happening on the ground in California, Arizona, Nevada, and throughout the Southwest.

Mr. Speaker, soon several colleagues and I will be introducing legislation to strengthen penalties for violations of Federal anti-animal fighting law. These are the same provisions that were passed by both the House and the Senate last year in the ag bill but were inexplicably stripped away in the conference committee. Now is the time to restore the penalties already approved by both Chambers. I hope that the Secretary of Agriculture will actively support this change in law. Adequate enforcement of Federal anti-animal fighting provisions is not only needed to stop the cruelty associated with animal fighting, but it is needed to prevent future outbreaks of Exotic Newcastle Disease. I hope that even those who are unmoved by the cruelty of animal fighting will recognize the threat that this industry poses to mainstream agriculture and to the American tax-

SMALLPOX VACCINE BILL OPPOSED BY FIRST RESPONDERS

The SPEAKER pro tempore. Pursuant to the order of the House of January 7, 2003, the gentleman from Ohio (Mr. Brown) is recognized during morning hour debates for 5 minutes.

Mr. BROWN of Ohio. Mr. Speaker, today we will vote on H.R. 1463, legislation to establish a smallpox vaccination compensation program. Today's vote should not be partisan. This bill is supposed to respond to concerns raised by nurses, firefighters, police officers, EMTs and other first responders; but nurses, firefighters, and other first responders oppose this bill. The bill is supposed to increase the number of first responders who voluntarily receive a smallpox vaccine.

The bioterrorism experts who helped put together the smallpox vaccine program say H.R. 1463 simply will not work. It will not improve participation rates. So the choice that both Republicans and Democratic Members of Congress face is whether to dismiss the concerns of first responders, ignore the advice of bioterrorism experts and vote for this bill anyway because the Republican leadership wants us to. In other words, do as we are told, don't do what is right.

There have been no hearings on this legislation and no opportunities for Members on either side to offer amend-

ments intended to improve the legislation. This bill was introduced on Friday and it is on the floor today. Only a handful of Members had a say on this bill. No one else. No firefighters, no police officers, no teachers, no EMTs, no nurses. We are being told to take it or leave it.

The fundamental question is, have Members of Congress become so far removed from the people we represent that we would pass a bill opposed by the very men and women it is supposed to protect? Do we in Congress think we know better than bioterrorism experts when it comes to bioterrorism preparedness?

Protecting first responders and their families in the event of a vaccine injury and increasing vaccine participation rates are important objectives. They are time-sensitive objectives. The national smallpox vaccination program is already underway and participation is lagging far, far behind the goal set by the administration. Twenty-five thousand people have been vaccinated, less than 5 percent of the March 1 benchmark. The experts tell us the bill will not jump-start the smallpox vaccine program, so it will not enhance our bioterrorism preparedness.

Congress should not be wasting valuable time enacting the wrong bill, particularly when our Nation's ability to respond to bioterrorism is at stake. Nor should Members of either side of the aisle support legislation that is unapologetically dismissive of the very people it is intended to protect: the nurses, the firefighters, the police officers, people who voluntarily place themselves at personal risk. Public health experts and first responders tell us this bill falls short in fundamental ways

Funding for the program is not guaranteed. A linchpin in any compensation program is guaranteed funding. Without it, the program itself is suspect. The incidence, to be sure, of smallpox vaccine injury is rare. However, in the event a serious injury occurs, volunteers may be out of work for an extended period of time or, in some tragic cases, permanently. We are asking first responders to volunteer for the smallpox vaccine on our behalf as citizens. We have a compelling obligation to protect these volunteers and their families in the rare event of a vaccine injury. It is indefensible to shortchange those police officers, nurses and firefighter volunteers, those who have volunteered for the smallpox vaccine.

The compensation is neither flexible nor adequate. H.R. 1463 invokes a one-size-fits-all cap that would provide, at maximum, a few years' worth of wages, even for a permanent disabling injury. For the compensation program to work, covered injuries must be defined. To meet the goals of efficiency, timeliness, fairness, and program integrity, the compensation program must be backed by an injury table. This bill is not

Finally, responsible administration of any vaccine program requires education, prescreening, as we found out tragically in four cases, and surveillance. H.R. 1463 ignores these costs, jeopardizing the future of the program and, more importantly, jeopardizing the future health of many of these volunteers, these nurses, these firefighters, these EMTs, these police officers.

Bioterrorism preparedness is either a priority or it is not. H.R. 1463 is a token response, and barely that. Our nurses, our firefighters, our police officers, our EMTs and our other first responders deserve better. That is why they oppose this bill. They want Congress to sit down with all the first responders at the table, all of us, discuss this bill and write legislation that will make the smallpox vaccine program work

SMALLPOX VACCINE COMPENSATION

The SPEAKER pro tempore. Pursuant to the order of the House of January 7, 2003, the gentlewoman from California (Mrs. CAPPS) is recognized during morning hour debates for 5 minutes.

Mrs. CAPPS. Mr. Speaker, what an honor it is for me to follow after my esteemed colleague from Ohio, the ranking member of the subcommittee that I am also a member on, where we would have very much appreciated being able to debate and discuss this legislation before we find it today on the suspension calendar.

Later today, we will take up the legislation and will be addressing the matter of smallpox vaccine compensation. It goes without saying that during the past week, with tragic incidents of death as a result, some serious concerns have been raised about the safety of this vaccine. These incidents speak even more forcefully for the need to do more research, find more information, and provide more screening about the smallpox vaccine. But if the administration insists that America's nurses, firefighters, and other first responders must be vaccinated against this disease to provide a protection, a bioterrorism protection shield, then now more than ever it is critical that we provide the peace of mind that these first responders need. Our first responders must know that in the event of an adverse or even fatal reaction, their needs and the needs of their families will be taken care of.

The overall goal of the administration is to make sure we are prepared for a possible outbreak of smallpox as part of a terrorist attack.

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But this initiative is failing. These medical and public safety professionals know very well the risks of this disease and the vaccine, and few have been